Fill in this information	n to identify your case:	
Debtor 1	Athanasios V Trakos	
Debtor 2 (Spouse, if filing)		
United States Bankru	uptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
	8-26110	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Forn	n 106l	MM / DD/ YYYY
Calaaduda l	Varia Incara	, 22,

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment						
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse			
	If you have more than one job,	Fundament status	■ Employed	■ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed			
	employers.	Occupation	Self Employed	Delivery			
	Include part-time, seasonal, or self-employed work.	Employer's name	MBF Auto Group Inc.	Edens			
	Occupation may include student or homemaker, if it applies.	Employer's address	5003 N Oriole Harwood Heights, IL 60706	6045 N Cicero Ave. Chicago, IL 60646			
		How long employed the	here? 13 yrs	10 yrs			

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 1,733.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 0.00 1,733.00

Debtor 1		Athanasios V Trakos		C	Case number (if known)		18-26110			
					For Debtor 1		For Debtor			
	Con	y line 4 here	4.		\$ 0.00	0	non-filing s	,733.00		
	Jop	y line 4 nere			<u> </u>	_	Ψ	,7 33.00	_	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$		\$	0.00	_	
	5b.	Mandatory contributions for retirement plans	5b.		\$ 0.00	_	\$	0.00	_	
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00		\$	0.00	_	
	5d.	Required repayments of retirement fund loans	5d.		\$ 0.00	_	\$	0.00	_	
	5e.	Insurance	5e.		\$ 0.00		\$	0.00	_	
	5f.	Domestic support obligations	5f.		\$ 0.00 \$ 0.00	_	\$	0.00	_	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.				·	0.00	_	
_			_					0.00	_	
6. -		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 0.00	_	\$	0.00	_	
7.	Caid	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	<u>)</u>	\$ <u>1</u>	,733.00	_	
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.		\$ 3,428.0	_	\$	0.00	_	
	8b.	Interest and dividends	8b.	•	\$0.0	<u>) </u>	\$	0.00	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c.		\$ 0.00)	\$	0.00		
	8d.	Unemployment compensation	8d.		\$ 0.00	<u> </u>	\$	0.00	_	
	8e.	Social Security	8e.		\$ 0.00	<u>5</u>	\$	0.00	_	
	8f.	Other government assistance that you regularly receive								
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental)							
		Nutrition Assistance Program) or housing subsidies.								
		Specify:	8f.		\$ 0.00)	\$	0.00		
	8g.	Pension or retirement income	8g.		\$ 0.00		\$	0.00	_	
	8h.	Other monthly income. Specify:	8h.	.+	\$	<u>)</u> +	+ \$	0.00	_	
9.	hhΔ	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.		\$	3,428.0	_	\$	0.0	0	
٥.	Auu	an other moome. Add mies da rob roc rou roc roi rog roi.	9.	L	3,420.00	_		0.00		
10	Calc	culate monthly income. Add line 7 + line 9.	10.	Φ.	3,428.00 +	Φ.	1,733.00	= \$	5,161.00	
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	.0.	Ψ_	3,420.00	Ψ_	1,733.00		3,101.00	
4.4		.	, L							
11.		e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your		nde	ents, vour roomma	tes	and			
	other friends or relatives.									
	_	not include any amounts already included in lines 2-10 or amounts that are not	availa	able	to pay expenses	liste				
	Spe	cify:					11.	+\$	0.00	
12	Δ٨٨	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.								
12.	Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it									
		applies					12.	\$	5,161.00	
								Combii	ned	
									y income	
13.	Do y	ou expect an increase or decrease within the year after you file this form	?							
		No.								
	П	Yes. Explain:								